## **Attention:**

This form or schedule is provided for information purposes and should not be reproduced on personal computer printers by individual taxpayers for filing.

The Form 5500-series of forms and schedules is printed on special paper with dropout ink so it can be processed by the computerized processing system "EFAST." The Forms 5500 and 5500-EZ (and related schedules) may be obtained by calling 1-800-TAX-FORM (1-800-829-3676). Be sure to order using the IRS form number.

Check the Department of Labor's website at <a href="www.efast.dol.gov">www.efast.dol.gov</a> for additional information concerning the processing system, electronic filing, software, and "non-standard" filings.

## SCHEDULE SSA (Form 5500)

Department of the Treasury

## Annual Registration Statement Identifying Separated Participants With Deferred Vested Benefits

Under Section 6057(a) of the Internal Revenue Code

► File as an attachment to Form 5500 unless box 1 is checked.

Official Use Only

OMB No. 1210-0110

2005

This Form is NOT Open to Public Inspection.

Internal Revenue Service	► File as an attachment to Form 5500 unle	ess box i is checked		Public Inspection.
or calendar plan year 2005 fiscal plan year beginning	MM/DD/YYYY	and ending	MM / E	D/YYYY
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Plan sponsor's name as show	n on line 2a of Form 5500		) ·	
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Plan sponsor's address (numbe	er, street, and room or suite no.) (If a P.O. box, se	e the instructions for I	ine 2.)	
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a Name of plan administrator (if o	other than sponsor)			
	4			
<b>b</b> Administrator's EIN				
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